

Department for Public Health EHR KHDA Education Meeting

FAQ

3/28/2017

Questions

Answers

If you know they are for 3 services, can you click on more than 1 service in the registration screen?	Each encounter can only have one visit type, but multiple visit reasons can be selected or free-type. Both the visit type and visit reason will appear on the schedule.
When scheduling WIC you may have 3 or 4 in a family, is there a way (an easy way) to pull up each member in that family in eCW like there is in CDP right now? Or are we going to have to do every single child and adult?	eCW does not classify patients in "households" like the CDP system. You do build and register each patient individually because all clinical information in eCW is tied to the patient.
How much will their special reports cost?	There will be no charge for reports of any kind.
If forms are revised, how will they get updated in the system and who will be responsible for this?	The OATS help desk will handle any change requests that are made. The request will go through the DPH/OATS change control board and, if approved, OATS will make the changes.
Are these templates for the whole state? Not each health department? So, each service that isn't needed for that health department will need to delete in template before locking the note (template)?	Templates are global, meaning that any health department has access to all templates. The nurse just needs to pull into the encounter the templates that are appropriate to the visits. The templates are not pre-loaded into encounters, so there will be no need to delete anything.
So when CDP use to rebill for the whole state on a statewide issue, eCW will not be doing that? Each individual LHD has to rebill claims?	Yes, each LHD will be responsible for the own rebills. However, clean claims are much easier to create in eCW due to the increased transparency, making the need for rebills much less frequent.
Will eCW know what to put as th primary code/cpt if we use several superbills?	Primary codes no longer drive the cost center, so for financial purposes, the primary code will not matter.
There are services that are flat fee and services that are sliding scale fee. Is it possible to do both services in the same visit?	Yes.
Can you charge private pay and 3 rd party pay in the same visit?	Yes.
Spreading expenses in 700, 718 based on CPT codes still? How will that get to accounting system?	This is done on the back end of the system via financial reports.
Am I understanding correctly that we will need zebra printers and another type of label printer?	eClinicalWorks is in the process of integrating with the Zebra printers. However, that integration is not complete at this time. eClinicalWorks recommends Dymo label printers.
How will offsite clinics work with the system?	This will depend on the type of clinic and the hardware and internet connection that the LHD has available at the clinic. Flu clinics, for example, can be documented in eCW via tablets or lap tops in real time or documented on paper and entered into eCW at a later time. The OATS team will work with each LHD to determine the best option for them.
Why would school health training be different? Our school program offers fewer services but codes the same as our clinic, same coding requirements.	The school health workflows are much more streamlined because they are not held to the same reporting standards as many other programs. Therefore, we train the school nurses separately as to not take up additional

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	time training them on system functionality that is not relevant to their job.
Is the medi scanner something we have to use or can we use webcams?	Medicscans and webcams are not required to use eCW. The Medicscan with an OCR reader pulls demographic information off of the patient's insurance card and drivers license and populates those fields in eCW. Webcams will simply capture a picture of the patient.
Will patients be able to check their records from home?	eClinicalWorks does offer a patient portal. At this time, however, we are not using that functionality. This is something we hope to roll out in the future.